18 - F1B

2018 PRIVATE LEAD SERVICE LINE REPLACEMENT PROGRAM Request for Qualifications (RFQ) Application

Licensed plumbers/utility contractors interested in performing lead service line replacements in the City of Fond du Lac, as funded by the Wisconsin DNR's Safe Drinking Water Loan Program, should submit a response to the RFQ by including (at minimum) the following information:

(This section to be filled out by applicant)

(This section to be fined out by applicant)							
Name of Business :							
Address:	-						
Email:							
City: Phone:							
Direct any questions regarding information provided on this form to:							
Name:Phone:							
Master Plumber Name:	-						
License Number(s):	-						
Expiration Date:	<u>-</u>						
Utility Pipe Layer Name, If Applicable:							
License Number(s):	_						
Expiration Date:	_						
Number of Employees that are Not Owners of Business:	_						
Master Electrician Name:							
License Number(s):	•						
Expiration Date:	•						
	•						

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STATE OF)					
COUNTY OF)					
		being du	ıly sworn, deposes a	nd says tha	at he/she	
(Name of Officer/Owner)			, , ,	ŕ	•	
is the (Title)	of					
(Title)			(Name of Firm)			
and that the answers to the fore correct, and that any owner, bo municipality, City of Fond du La	nding compar	ny, or other agei	ncy herein named is	hereby aut	thorized to sup	oply the
				(Pri	nted Name of	Officer/Owner
					(Signature of	Officer/Owner
Subscribed and sworn before me this	e this	day of	2	·•		
			Notary F	ublic		
		Му	Commission Expires:			